

CORI REQUEST FORM

Tewksbury Council on Aging has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data. As an applicant/employee for the position of _____. I understand that a criminal record check will be conducted for conviction and pending criminal case information only and that it will not necessarily disqualify me. The information below is correct to the best of my knowledge.

APPLICANT/EMPLOYEE SIGNATURE
(Unless otherwise preempted by law)
APPLICANT/EMPLOYEE INFORMATION (PLEASE PRINT)

LAST NAME	FIRST NAME	MIDDLE NAME
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MAIDEN NAME OR ALIAS (IF APPLICABLE)	PLACE OF BIRTH

DATE OF BIRTH	SOCIAL SECURITY NUMBER (must provide last six #'s)	ID Theft Index PIN (if applicable)
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MOTHER'S MAIDEN NAME

CURRENT AND FORMER ADDRESSES:

SEX: _____ HEIGHT: ____ft. ____in. WEIGHT: _____ EYE COLOR: _____

STATE DRIVER'S LICENSE NUMBER: _____ (include state of issue)

***THE ABOVE INFORMATION WAS VERIFIED BY REVIEWING THE FOLLOWING FORM OF GOVERNMENT ISSUED PHOTOGRAPHIC IDENTIFICATION: _____.

REQUESTED BY: _____
SIGNATURE OF CORI AUTHORIZED EMPLOYEE

The CHSB Identity Theft Index PIN Number is to be completed by those applicants that have been issued an Identity Theft PIN Number by the CHSB. Certified agencies are required to provide all applicants the opportunity to include this information to ensure the accuracy of the CORI request process. All CORI request forms that include this field are required to be submitted to the CHSB via mail or fax to 617-660-4614.